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FOR ACTION

RECOMMENDATION FOR FUNDING FOR A SHORT-DURATION COUNTRY PROGRAMME**

Algeria

SUMMARY

This document contains a recommendation for funding, from general resources and supplementary funds, for the three-year country programme of Algeria that supports activities where the country programme is under preparation. The Executive Director recommends that the Executive Board approve the amount of $2,748,000 from general resources, subject to the availability of funds, and $1,600,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the period 1998-2000.

* E/ICEF/1997/20.

** The figures provided in this document are final and take into account unspent balances of programme cooperation at the end of 1996. They will be contained in the "Summary of 1997 recommendations for general resources and supplementary funding programmes" (E/ICEF/1997/P/L.18).

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Basic data (1995 unless otherwise stated)

Child population (millions, 0-17 years)	13
U5MR (per 1,000 live births)	40
IMR (per 1,000 live births)	35
Underweight (% moderate and severe)	13
MMR (per 100,000 live births, 1990)	160
Literacy (% male/female)	74/49
Primary school enrolment (% net male/female)	95/90
Primary school children reaching grade 5 (%, 1994)	94
Access to safe water (%)	78
Access to health services (%, 1993)	98
GNP per capita	$1,600

One-year-olds fully immunized against:

tuberculosis:	93 per cent
diphtheria/pertussis/tetanus:	83 per cent
measles:	77 per cent
poliomyelitis:	83 per cent

Pregnant women immunized against:

tetanus:	52 per cent

THE SITUATION OF CHILDREN AND WOMEN

1. The past two years in Algeria have witnessed significant political and socio-economic developments. Multi-party presidential elections were organized for the first time in November 1995, followed, in November 1996, by a referendum on a revision incorporating pluralism and democratic principles in the Constitution. The security situation remains worrying and is a major concern for the country. Persistent violence, often characterized in recent months by the wholesale massacre of civilians, is affecting a large number of children and women. It is a serious obstacle to the process of economic and social recovery and comes at a time when Algeria has resolutely embarked on the establishment of structural adjustment plans in accordance with the recommendations of the International Monetary Fund. In macroeconomic terms, the results have been convincing - foreign exchange reserves are up ($5.3 billion in 1996 compared to $3.5 billion in 1995) and the gross domestic product rose by 4.2 per cent in 1996 compared to 3.5 per cent in 1995. Nonetheless, in social terms, the population in general is worse off than before (there was a 20 per cent decrease in purchasing power in 1996) and the unemployment rate is high (28 per cent for the labour force as a whole and 55 per cent in the 20-24 years age group). Algeria derives 95 per cent of its foreign currency income from its hydrocarbon resources. It relies on imports for 70 per cent of its food needs, particularly cereals, milk, sugar and coffee.

2. The results of the national survey on mid-decade goals (multiple indicator cluster survey (MICS)) show an improvement in the immunization coverage of children under one year of age. A number of factors have contributed to this: the regular supply of vaccines, a strengthened cold chain, the retraining of paramedical personnel, more effective epidemiological monitoring. The hospitalization rate for diarrhoea in children two years of age and under and the hospital mortality rate dropped from 26 per cent in 1994 to 13 per cent in 1996; the rate of use of oral rehydration therapy is 37 per cent, but 86 per cent of mothers administer some sort of treatment. Around 92 per cent of the salt consumed in Algeria is iodized. Acute respiratory infections (ARI) are the primary cause of death among hospitalized children under five years of age. Fifty-six per cent of children under four months old are exclusively breastfed. The survey on maternal and infant mortality conducted by the Ministry of Health in 1989 showed that 24 per cent of deaths among women between 15 and 49 years of age were maternity-related. The MICS also shows that 3 per cent of children under five years of age were severely underweight in 1995 compared to 1.5 per cent in 1992.

3. In 1996, the Government allocated 23 per cent of the State budget to the education sector. The number of children receiving basic education (6-15 years of age) has gone from 5.1 million in 1986-1987 to 6.4 million in 1996-1997 out of a population estimated, in 1997, at 29 million. According to the World Education Report published by the United Nations Educational, Scientific and Cultural Organization in 1996, the number of illiterates is estimated at 6,582,000 (66 per cent are female). According to the Ministry of National Education the reasons for the disparity in school attendance rates between girls and boys have to do, in certain regions (the sparsely populated far south and high plateau regions), with the fact that children have to travel great distances to get to school from their homes and there is no transport. The closing of school canteens (in 1985 there were 5,296 providing meals to 37 per cent of the pupils in primary school, compared to 3,825 and 12 per cent in 1996) accentuates this disparity. In the context of the discussion on reform of the educational system, the Ministry has inquired about the new educational approach advocated by UNICEF: "global education".

4. The Ministry of Labour and Social Protection estimates the number of children abandoned by teenage mothers at 3,000 per year, out of 750,000 births. The number of school-age handicapped children is estimated at 134,000.

5. In the framework of the implementation of the provisions of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, ratified in 1992 and 1996, respectively, the Government recently set up follow-up and evaluation bodies, inter alia, the Higher Council for Youth, the Higher Council on Education and the National Council for Women.

PROGRAMME COOPERATION, 1996-1997

6. The cooperation programme for 1996-1997 was designed to safeguard the progress achieved, particularly in the fields of health and education, in the face of a difficult socio-political situation. Strategies were based on:

(a) strengthening the resources and capacities of the institutions and agencies involved in the cooperation programme at the national and local levels; and
(b) mobilizing decision makers and the population in general for a stronger commitment to children.

7. In the health programme, stress was laid on eradicating poliomyelitis and increasing immunization coverage rate for measles. Three national immunization campaigns for all children under four years of age were conducted in 1994, 1995 and 1996. Only two cases of polio were confirmed by the Institut Pasteur of Algeria in 1996 compared to four in 1995. Immunization coverage against measles rose from 69 per cent to 77 per cent. UNICEF provided the Ministry of Health and Population with 16 million doses of vaccines, largely thanks to supplementary funds donated by the Government of Spain and by Rotary International.

8. UNICEF contributed to the strengthening of the cold chain and the training of basic personnel. Within the framework of the ARI project, it contributed to the training of 190 general practitioners and paediatricians servicing 12 pilot zones, to the provision of equipment, and to the design and printing of the guide to ARI control (5,000 copies). UNICEF provided 375,000 oral rehydration salt packets. Within the context of the maternal and child health (MCH) project, UNICEF contributed to the holding of five regional seminars for 220 midwives on breastfeeding and financed the production of the national nutrition guide (5,000 copies) and the holding of a national seminar on nutrition (50 participants). UNICEF is assisting the Ministry in the preparation of a national programme to reduce maternal mortality. UNICEF has been a member of the thematic group of the Joint and Co-sponsored United Nations Programme on HIV/AIDS (UNAIDS) since 1996 and is participating in the development of this programme.

9. In support of the education programme, UNICEF has made a technical and material contribution to the integration of health education in schools in 22 wilayate (departments) of the country, in particular, by providing teaching and audio-visual materials to 102 experimental schools and facilitating the training of 80 teachers and primary and secondary school inspectors. UNICEF contributed to the opening of 333 integrated literacy classes for women and girls and provided teaching materials and practical equipment (sewing machines, weaving looms, knitting machines). This project has received a sizeable contribution from the Canadian International Development Agency and the Spanish and French Committees for UNICEF. The Ministry of National Education has begun reviving the network of school canteens; in this context, UNICEF has contributed to the retraining of 2,400 managers (school principals, teachers and bursars) in 1995-1996. UNICEF contributed to the holding of the first national seminar on global education, which was attended by 45 primary and secondary school inspectors and conducted by an international expert and the regional adviser on education.

10. In the context of the child protection programme, priority has been accorded to extending the project for the integration of handicapped children in schools. UNICEF provided equipment to 12 classes for 102 hearing or sight impaired children. UNICEF also provided equipment to two day-care centres for children without families.

11. Communication and social mobilization and advocacy have been important activities during this period. UNICEF supported the National Newsreel Agency (ANAF) and the National Institute of Public Health (INSP) in the production and dissemination of audio-visual and graphic materials: 20 television spots, 16 radio spots and more than 15 posters, brochures and leaflets were produced during these past two years for different programmes. Advocacy has focused, in particular, on the popularization of the two Conventions in cooperation with a number of non-governmental organizations at the local and national levels and with State institutions.

12. UNICEF, in cooperation with the World Health Organization (WHO) and the United Nations Population Fund (UNFPA), has initiated and provided technical and material support for the conduct of the MICS, which was carried out by the Ministry of Public Health and Population. UNICEF has also made a technical and material contribution to the preparation of a national survey on anaemia in children and women of child-bearing age, to be held in 1997, and to the drafting and transfer to national experts of the analysis of the situation of women and children in Algeria, completed in 1996.

Lessons learned from recent cooperation

13. The routine system of health data collection and analysis, which is bureaucratic and inefficient, is not living up to the expectations of the Ministry of Public Health and Population. For the purposes of sound and optimal planning, this system must be made reliable and effective.

14. Thus far programmes have been designed for development at the national level. This approach makes it impossible to focus on backward areas. An area-based approach would yield greater value added.

15. Regional cooperation at the level of the Maghreb would be necessary in order to meet the goals of the decade. For example, such cooperation would be useful in eradicating polio from the pocket at El Oued on the border with Tunisia, where it remains endemic.

16. Capacities and resources in the field of information and communication are under-utilized. In a country where 95 per cent of the households have television (most receive foreign channels by satellite), its utilization should be optimized through the globalization of communication, social mobilization and advocacy within the framework of the two Conventions.

RECOMMENDED PROGRAMME OF COOPERATION

Estimated annual expenditure

(Thousands of United States dollars)

	1998	1999	2000	Total
General resources				
Health	375	375	375	1 125
Education	220	220	220	660
Child protection	100	100	100	300
Social mobilization and advocacy	130	130	130	390
Cross-sectoral costs	91	91	91	273
Subtotal	916	916	916	2 748
Supplementary funding				
Health	250	250	175	675
Education	250	200	175	625
Child protection	100	100	100	300
Subtotal	600	550	450	1 600
Total	1 516	1 466	1 366	4 348

Goals, objectives and strategies

17. The goal is to contribute to enhancing the well-being of children and women in Algeria through a development-oriented approach whose main strategies are: social mobilization; strengthening of cross-sectoral linkages among the different national institutions; promotion of cooperation among United Nations agencies; building of the human and technical capacities of national institutions and non-governmental organizations; and concentration of efforts on the most deprived regions (southern and high plateau areas) in order to reach the poorest populations.

18. This programme has four components: health; education; social mobilization and advocacy; and child protection. A community development project will also be set up jointly by UNICEF, the United Nations Development Programme (UNDP) and UNFPA.

Health

19. The health programme includes four projects: immunization; control of diarrhoeal diseases (CDD); control of acute respiratory infections (ARI); and maternal and child health (MCH). The health programme is aimed at supporting the Ministry of Health and Population, which has set itself the goal of reducing both infant and maternal mortality by 15 per cent. To this end, national immunization days will be coupled with mopping up activities in specific areas. UNICEF will support, in particular, the sustainable strengthening of the

national heath information system and of the epidemiological monitoring system. With regard to ARI, CDD and MCH, 828 trainers will be briefed. By promoting safe motherhood, UNICEF will contribute to the national programme to combat maternal mortality, which receives technical and material support from UNFPA and WHO. A national nutrition programme will be developed with support from, inter alia, WHO and UNFPA. Within this context, UNICEF will provide assistance to INSP to conduct a national survey and specific studies. The development of the UNAIDS project in which UNICEF, WHO, UNDP and UNFPA are participating, will be continued.

Education

20. The education programme is based on the principle of education for all with a view to reducing gender-based and social disparities. The goals of this programme are: the integration of global education in teaching methods; the promotion of school canteens in order to reduce the drop-out rate among girls and provide better nourishment to the pupils; and the elimination of illiteracy among girls and women. UNICEF will provide its support to the Government for the training of 800 school administrators in the techniques of using global education methods and, in particular, the techniques of health education. UNICEF will contribute to the training of 1,300 school dieticians. UNICEF will also contribute to the training of 200 teachers and to teaching materials and technical equipment for 200 literacy classes for 50,000 girls and women ranging from 10 to 44 years of age in 10 wilayate.

Child protection

21. The objectives of the Ministry of Labour and Social Protection are to build local capacities to assume responsibility for and to integrate handicapped children and children without families, and to enable the Ministry and non-governmental organizations to build their capacities for studies, evaluation and follow-up in this area. UNICEF will assist with the establishment of 20 new integrated classes for hearing, sight or mentally impaired children, the technical and material strengthening of two day-care centres and, in particular, the development of the national adoption network in cooperation with non-governmental organizations and public institutions and the launching of studies and surveys focusing on the linkage between violence and the mental and physical health of children and mothers.

Social mobilization and advocacy

22. Communication, social mobilization and advocacy are essential tools of programme development. The main goals are to build the knowledge and influence the attitudes and behaviour of the population in general and of the family in particular in the areas of health, education and social well-being. The main activities are: (a) the introduction of a global communication plan to be implemented by a cross-sectoral team representing all the institutions involved, including television and radio; and (b) the building of the social marketing capacities of ANAF, INSP and non-governmental organizations. Within the context of advocacy activities, UNICEF will continue to seek supplementary funds from various countries, including the Euro-Mediterranean countries; foreign

companies, in particular oil companies, established in Algeria; and other donors.

23. UNICEF, UNDP and UNFPA have made a commitment to set up a pilot community development project in the far south of the country which would integrate, inter alia, health, education, social protection, family planning and the promotion of economic activities. To this end, UNICEF will seek supplementary funds for the project.

Cross-sectoral strategies and cooperation with other agencies

24. During this cooperation cycle, UNICEF will extend its cooperation to new partners such as the Ministry of Youth and Sports, the Higher Council for Youth and the Ministry for National Solidarity and the Family. UNICEF has harmonized its programming cycle with those of UNDP and UNFPA for the period 1998-2000. In July 1997, UNICEF and the other United Nations agencies will move their offices to a new building graciously provided by the Government of Algeria.

Programme management

25. The UNICEF office will build its human and technical capacities in the fields of programming and technical support in order to complete the cooperation programme which was prepared in close consultation with all the ministries and institutions involved. This programme will be set up and periodically evaluated by a cross-sectoral group, including UNICEF. Lastly, a biannual evaluation and a mid-term review of the programme are planned.

TABLE

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

COUNTRY : ALGERIA
PROGRAMME : 1998-2000

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET				POSTS a/										STAFF COSTS b/		
	GR	FSF	NSF	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
GENERAL RESOURCES :																	
HEALTH	1,125,000			1,125,000	0	0	0	0	0	0	0	1	0	1	0	52,139	52,139
EDUCATION	660,000			660,000	0	0	0	0	0	0	0	0.5	0	0.5	0	26,070	26,070
SOCIAL MOBILIZATION AND ADVOCACY	390,000			390,000	0	0	0	0	0	0	0	1	0	1	0	38,006	38,006
CHILD PROTECTION	300,000			300,000	0	0	0	0	0	0	0	0.5	0	0.5	0	26,070	26,070
CROSS-SECTORAL COSTS	273,000			273,000	0	0	0	0	0	0	0	0	4	4	0	88,351	88,351
TOTAL GR	2,748,000			2,748,000	0	0	0	0	0	0	0	3	4	7	0	230,634	230,634
SUPPLEMENTARY FUNDING :																	
HEALTH - -		0	675,000	675,000	0	0	0	0	0	0	0	0	0	0	0	0	0
EDUCATION		0	625,000	625,000	0	0	0	0	0	0	0	0	0	0	0	0	0
SOCIAL MOBILIZATION AND ADVOCACY		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CHILD PROTECTION		0	300,000	300,000	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL SF		0	1,600,000	1,600,000	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL GR & SF	2,748,000	0	1,600,000	4,348,000	0	0	0	0	0	0	0	3	4	7	0	230,634	230,634
SUPPORT BUDGET		Operating costs		610,314													
		Staffing			0	0	1	0	0	0	1	2	5	8	522,721	219,705	742,426
GRAND TOTAL (GR + SF + SB)					0	0	1	0	0	0	1	5	9	15	522,721	450,339	973,060
Number of posts and staff costs:																	
Current programme cycle											1	3	8	12			
At the end of proposed programme cycle (indicative only)											1	5	9	15	522,721	450,339	973,060

GR = general resources.
SF = supplementary funding.
FSF = funded supplementary funding.
NSF = new supplementary funding.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.